from a greater height and a greater opportunity. How, then, does H. G. Wells analyze the social disorganization with which we are contending? What is his diagnosis, prognosis and, above all, what course of therapy are we to pursue after consultation with him? The answer to these questions at once suggests the statement recently of a leader in the financial world who said that business stability would come only with increased faith, with a return to the values of religion, and the development of the old-time emphasis on the supreme importance to the state as to the individual of loyalty to God, to country and to home. These three are indeed what makes Americanism, both past and present. We, as physicians, need especially to reaffirm this ancient creed. In it is our salvation, and the future of America and of the world.

Once more, to answer the questions as H. G. Wells answers them. It can be done no better than in his own words, and these words are worthy of much pondering. "Our modern communities are no longer cemented; they lack organized solidarity; they are not prepared to stand shocks and strains; they have become dangerously loose, mentally and morally. That, I believe, is the clew to a great proportion of the present social and political troubles of the world. need to get back to a cement. We want a Bible. We want a Bible so badly that we cannot afford to put the old Bible on a pinnacle out of daily use. We want it readapted for use. If it is true that the old Bible falls short in its history and does not apply closely to many modern problems, then we need a revised and enlarged Bible in our schools and homes to restore a common ground of ideas and interpretations if our civilization is to hold together."

So much for the diagnosis, and here is the remedy. People should "see themselves and the news of today as part of one great development. It would give their lives significance and dignity. It would give the events of the current day significance and dignity. It would lift their imaginations up to a new level. If you look back into the lives of the Pilgrim Fathers, let us say, you will find that these men had a sense of personal significance, a sense of destiny, such as no one in politics or literature seems to possess today. They were still in touch with the old Bible. Today if life seems adventurous and fragmentary, and generally aimless, it is largely because of this one thing. We have lost touch with history. We have ceased to see human affairs as one great epic And only by the universal teaching of universal history can that epic quality be restored.'

Foremost in the new education and development of the sense of destiny and personal responsibility, Wells places the study of the "rules of life; rules of health. This, also, the modern citizen needs and should have; he and she needs a book of personal wisdom. One of the first duties of a citizen is to keep himself in mental and bodily health in order to be fit for the rest of his duties."

It is a keen analysis by a great thinker. We do need to return to the old gods, the social values of Americanism, the spiritual foundations of our fathers' fathers. As a profession, we must lead in good citizenship, in observance of law, in maintenance of order, in respect for the flag and reverence for the traditions of our country. For God, for country, for home—no motto can go further. No guide can be safer. It is time for us to start.

THE PHYSICIAN AND SOCIAL AGENCIES

Of necessity, the attitude of the physician toward social agencies must be most sympathetic. His work is so intimately related to social service and so admirably conserved and multiplied by the social worker that he cannot but be interested in the conduct and development of the social agen-He should be anxious to co-operate. He should be willing first to learn from experts in the field of social medicine, sociology and social relief, as to what is needed of him in this new and fast advancing department. Having learned that, he must in his turn teach, advise and contribute of his knowledge and ability. He must face the fact that social workers are the vanguard of an army of laymen, who, with awakened conscience and eyes opened to the possibility of diminishing the enormous losses of disease, are working inevitably toward an era in which preventive, social and group medicine will absorb a large amount of his effort.

He knows all too well the tragedy of long-continued illness and disablement in the poor and middle-class family. And his desire to change these conditions should be so great as to make him willing, if need be, to suffer some inconvenience and financial loss during the transition to a more social type of practice.

The physician must admit that, overworked and engrossed as he is with technical problems, it is the social worker who must do the planning of ways and means. The physician, however, should enter into conference with these workers, not as an obstructionist fearful of change, nor as one self-ishly demanding his own rights, but as a sympathetic expert who would have the new era marked by the most extensive use of the latest and best methods of treatment and diagnosis.

Those physicians who work among the poor (and who of us does not?) should know what social agencies are available to help him solve the problems which constantly arise. They must know how and when to call these agencies to their aid. They must realize the importance of the work of the agencies in making the treatment of disease actually effective and often even possible.

Here lies a great department of modern medicine. Its development lies in the hands of the social agencies. These agencies to be fully effective, require the advice and counsel which only the physician can give. Let the relationship be mutually sympathetic, helpful, conciliatory, and it will be mutually efficient and beneficial.